

FRATERNAL SOCIETIES

COMPANY NAME: _____ NAIC Company Code: _____
 Contact: _____ Telephone: _____
 REQUIRED FILINGS IN THE STATE OF: _____ Filings Made During the Year 2015

(1) Checklist	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 ½"x14")	3	EO	xxx	3/1	NAIC	G, H(a), I, L, N(b)
	1.1	Printed Investment Schedule detail (Pages E01-E27)	3	EO	xxx	3/1	NAIC	
	2	Quarterly Financial Statement (8 ½" x 14")	2	EO	xxx	5/15, 8/15, 11/15	NAIC	G, H(a), I, L, N(b)
	3	Separate Accounts Annual Statement (8 ½"x 14")	3	EO	xxx	3/1	NAIC	G, H(a), I, L, N(b)
		II. NAIC SUPPLEMENTS						
	10	Accident & Health Policy Experience Exhibit	2	EO	xxx	4/1	NAIC	M
	11	Analysis of Annuity Operations by Lines of Business	2	EO	xxx	4/1	NAIC	M
	12	Analysis of Increase in Annuity Reserves During Year	2	EO	xxx	4/1	NAIC	M
	13	Health Care Exhibit (Parts 1, 2 and 3) Supplement	2	EO	xxx	4/1	NAIC	M
	14	Health Care Exhibit's Allocation Report Supplement	2	EO	xxx	4/1	NAIC	M
	15	Interest Sensitive Life Insurance Products Report	2	EO	xxx	4/1	NAIC	M
	16	Investment Risk Interrogatories	2	EO	xxx	4/1	NAIC	M
	17	Long-Term Care Experience Reporting Forms	2	EO	xxx	4/1	NAIC	M
	18	Management Discussion & Analysis	2	EO	xxx	4/1	Company	J, N(b)
	19	Medicare Supplement Insurance Experience Exhibit	2	EO	xxx	3/1	NAIC	M
	20	Medicare Part D Coverage Supplement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	M
	21	Risk-Based Capital Report	1	EO	xxx	3/1	NAIC	G, I, N(b)
	22	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	
	23	Trusted Surplus Statement	2	EO	xxx	3/1, 5/15, 8/15, 11/15	NAIC	G, M
	24	Supplemental XXX/XXXX Reinsurance Exhibit	2	EO	xxx	4/1	NAIC	M
		Actuarial Related Items						
	25	Actuarial Certification Related Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities	2	EO	xxx	3/1	Company	G, M
	26	Actuarial Certification Related to Hedging required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	G, M
	27	Actuarial Certification Related to Reserves required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	G, M
	28	Actuarial Certification regarding use 2001 Preferred Class Table	2	EO	xxx	3/1	Company	G, M
	29	Actuarial Memorandum Related to Universal Life with Secondary Guarantee Policies required by Actuarial Guideline XXXVIII 8D	1	N/A	xxx	4/30	Company	G, M
	30	Actuarial Opinion	3	EO	xxx	3/1	Company	G, M, N(b)(e)
	31	Actuarial Opinion on X-Factors	2	EO	xxx	3/1	Company	G, M
	32	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit	2	EO	xxx	3/1	Company	G, M
	33	Actuarial Opinion on Synthetic Guaranteed Investment Contracts	2	EO	xxx	3/1	Company	G, M
	34	Actuarial Opinion required by Modified Guaranteed Annuity Model Regulation	2	EO	xxx	3/1	Company	G, M
	35	Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	G, M
	36	Management Certification that the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII	2	EO	xxx	3/1	Company	G, M
	37	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	G, M
	38	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXV	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	G, M
	39	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	G, M

	40	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	G, M
	41	Reasonableness & Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value)	2	EO	xxx	3/1, 5/15, 8/15, 11/15	Company	G, M
	42	RBC Certification required under C-3 Phase I	1	EO	xxx	3/1	Company	G, M
	43	RBC Certification required under C-3 Phase II	1	EO	xxx	3/1	Company	G, M
	44	Statement on non-guaranteed elements – Exhibit 5 Int. #3	2	EO	xxx	3/1	Company	G, M
	45	Statement on participating/non-participating policies – Exhibit 5, Inter. #1&2	2	EO	xxx	3/1	Company	G, M
	46	RAAIS required by Actuarial Opinion and Memorandum Regulation (Model 872), Section 7A(5)	2	N/A	xxx	3/15	Company	G, M
		III. ELECTRONIC FILING REQUIREMENTS						
	60	Annual Statement Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	61	March .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	62	Risk-Based Capital Electronic Filing	xxx	EO	N/A	3/1	NAIC	
	63	Risk-Based Capital .PDF Filing	xxx	EO	N/A	3/1	NAIC	
	64	Separate Accounts Electronic Filing	xxx	EO	xxx	3/1	NAIC	
	65	Separate Accounts .PDF Filing	xxx	EO	xxx	3/1	NAIC	
	66	Supplemental Electronic Filing	xxx	EO	xxx	4/1	NAIC	
	67	Supplemental .PDF Filing	xxx	EO	xxx	4/1	NAIC	
	68	Quarterly Statement Electronic Filing	xxx	EO	xxx	5/15, 8/15 & 11/15	NAIC	
	69	Quarterly .PDF Filing	xxx	EO	xxx	5/15, 8/15 & 11/15	NAIC	
	70	June .PDF Filing	xxx	EO	xxx	6/1	NAIC	
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountants Letter of Qualifications	2	EO	N/A	6/1	Company	N(d)
	82	Audited Financial Reports	2	EO	xxx	6/1	Company	J, N(b)
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A	5/1	Company	J
	84	Communication of Internal Control Related Matters Noted in Audit	2	N/A	N/A	8/1	Company	R
	85	Independent CPA (change)	1	N/A	N/A	12/1	Company	N(d)
	86	Management's Report of Internal Control Over Financial Reporting	2	N/A	N/A	8/1	Company	
	87	Notification of Adverse Financial Condition	2	N/A	N/A	Within 10 days of CPA Discover	Company	
	88	Request for Exemption to File	1	N/A	N/A	3/1	Company	J
	89	Relief from the five-year rotation requirement for lead audit partner	1	EO	xxx	3/1	Company	J
	90	Relief from the one-year cooling off period for independent CPA	1	EO	xxx	3/1	Company	J
	91	Relief from the Requirements for Audit Committees	1	EO	xxx	3/1	Company	J
		V. STATE REQUIRED FILINGS***						
	101	Certificate of Compliance	0	0	0		State	
	102	Certificate of Deposit	0	0	0		State	
	103	Certificate of Valuation	0	0	0		State	
	104	Filings Checklist (with Column 1 completed)	0	0	0		State	
	105	Premium Tax	1	0	1	3/1	State	Q
	106	State Filing Fees	1	0	1	7/1	State	C, O
	107	Application for Renewal of C of A	1	N/A	1	7/1	State	N(c), G, H(a)
	108	Updated Biographical	1	N/A	N/A	3/1, 5/15, 8/15, 11/15	Company	G, H(a) Domestic ONLY
	109	Basket Clause	1	N/A	N/A	3/1	State	M, T
	110	Actuarial Opinion Memorandum	1	N/A	N/A	4/30	Company	
	111	Certificate of Compliance with Advertising Rules	1	N/A	1	3/1	State	U

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

***For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should not be submitted by the company to the NAIC.

Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL:
http://www.naic.org/public_lead_state_report.htm